

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	M.C.		10/25/99
O.I.P.E. CLASSIFIER	E	10	10/29/99
FORMALITY REVIEW	E	64937	11/10/99

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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9	✓
10	✓
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12	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE